U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY
OR
VOCATION OF POWER OF ATTORNEY

## REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND

CHANGE	OF CO	RRESPO	NDENCE	<b>ADDRESS</b>

Application Number		10/686,385		
	Filing Date	October 14, 2003		
	First Named Inventor	Kelly L. MORRISON et al		
Title		SYSTEM AND METHOD FO		
-	Art Unit	3621		
	Examiner Name			
	Attorney Docket Number	029714-00742		

I hereby revoke all previous powers of attorney given in the above-identified application.								
A Power of Attorney is submitted herewith.								
Number as my/o identified above and Trademark	hereby appoint Practitioner(s) associated with the following Customer lumber as my/our attorney(s) or agent(s) to prosecute the application dentified above, and to transact all business in the United States Patent and Trademark Office connected therewith:			79439				
I hereby appoint	OR I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:							
	Practitioner(s) Name	Registration Number						
Disease recognizes as change the correspondence address for the chave identified application to:								
Please recognize or change the correspondence address for the above-identified application to:  The address associated with the above-mentioned Customer Number.								
OR  The address associated with Customer Number: 79439  OR								
Firm or Individual Name								
Address								
City	`	State		Zip				
Country		Email						
Telephone   Email    I am the:  Applicant/Inventor.  OR  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on								
	SIGNATURE of Applicar	nt or Assignee of	f Record					
Signature	Donaluntha.		Date	March 2, 2012				
Name	Daniel C. Stelter	T	Telephone	847.887.6650				
Title and Company Assistant Secretary, Cardinal Health Technologies, LLC								
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.								
*Total of	*Total of forms are submitted.							

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.